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| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence during pendency of filed application)</i> | 0001/PTO<br>Rev. 10/95 | U.S. Department of Commerce<br>Patent and Trademark Office | Application Number     | 08/619,203     |
|  |                        |  | Filing Date            | March 21, 1996 |
|  |                        |  | First Named Inventor   | David Keene    |
|  |                        |  | Group Art Unit Number  | 2774           |
|  |                        |  | Examiner Name          | Francis Nguyen |
| Total Number of Pages in This Submission   |                        | 31   | Attorney Docket Number | 3369 US        |

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| ENCLOSURES (check all that apply)   |   |
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| <input type="checkbox"/> Assignment & PTO-1595  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                                   |
| <input type="checkbox"/> Declaration  | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)                         |
| <input type="checkbox"/> Small Entity Statement   | <input type="checkbox"/> Certified Copy of Priority Document(s)   |
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| <input type="checkbox"/> Status Request   | <input type="checkbox"/> _____  |
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REMARKS:

| SIGNATURE OF ATTORNEY OR AGENT |                                      |        |               |
|--------------------------------|--------------------------------------|--------|---------------|
| Signature:                     |                                      |        |               |
| Attorney/Reg. No.:             | Arnold M. de Guzman, Reg. No. 39,955 | Dated: | March 5, 1999 |

| CERTIFICATE OF MAILING  |                     |        |               |
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| I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Box AF, Assistant Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10. |                     |        |               |
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| Typed or Printed Name:  | Arnold M. de Guzman | Dated: | March 5, 1999 |
| Express Mail Mailing Number (optional):   | EM207853105US       |        |               |

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|--|--|--------------------------|----------------|
| <b>FEE TRANSMITTAL</b><br><br><b>TOTAL AMOUNT OF PAYMENT</b><br>Subtotal (1) + Subtotal (2) + Subtotal (3) = <b>(\$0.00)</b> | U.S. Department of Commerce<br>Patent and Trademark Office | <b>Complete if Known</b> |                |
|  |  | Application Number       | 08/619,203     |
|  |  | Filing Date              | March 21, 1996 |
|  |  | First Named Inventor     | David Keene    |
|  |  | Group Art Unit           | 2774           |
|  |  | Examiner Name            | Francis Nguyen |
|  |  | Attorney Docket Number   | 3369 US        |

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| METHOD OF PAYMENT   |                           | FEE CALCULATION (continued)   |                      |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
|---|---------------------------|---|----------------------|---------------------------|---------------------------|-----------------|---------|-----------|----------|-------------------------------------|----------------------|----------|----------|--|----------------------|-------------|-------------|--|----------------------|-----------|----------|--|----------------------|-----------|-----------|---|----------------------|-----------|-----------|--|----------------------|-------------|-----------|---|----------------------|-------------|-----------|--|----------------------|-----------|-----------|------------------|----------------------|-------------|-----------|--|----------------------|-------------|-----------|--------------------------------|----------------------|-----------|-----------|------------------|----------------------|-----------|-----------|-------------------------------|----------------------|----------|----------|---|----------------------|-----------|-----------|--|----------------------|----------|----------|--|----------------------|-----------|-----------|---|----------------------|-----------|-----------|--|----------------------|----------------------|--|----------------------|----------------------|----------------------|--|----------------------|----------------------|---------------------|--|-----------------|--|
| <b>1. The Commissioner is hereby authorized to:</b><br><br><input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account.<br><br><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17 or credit any over payments to the below mentioned deposit account.<br><br><input type="checkbox"/> Charge the Issue Fee set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b) to the below mentioned deposit account.<br><br>Deposit Account Number: 19-2555<br>Deposit Account Name: FENWICK & WEST LLP<br><br>A Duplicate Copy of this authorization is attached<br><br><b>2. <input type="checkbox"/> Payment Enclosed:</b><br>[ X ] Check [ ] Other |                           | <b>3. ADDITIONAL FEES</b><br><table border="1"><thead><tr><th>Large Entity Fee Code/Fee</th><th>Small Entity Fee Code/Fee</th><th>Fee Description</th><th>Fee Due</th></tr></thead><tbody><tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td><input type="text"/></td></tr><tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td><input type="text"/></td></tr><tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td><input type="text"/></td></tr><tr><td>115/\$110</td><td>215/\$55</td><td>Extension for response within first month<sup>1</sup></td><td><input type="text"/></td></tr><tr><td>116/\$380</td><td>216/\$190</td><td>Extension for response within second month<sup>1</sup></td><td><input type="text"/></td></tr><tr><td>117/\$870</td><td>217/\$435</td><td>Extension for response within third month<sup>1</sup></td><td><input type="text"/></td></tr><tr><td>118/\$1,360</td><td>218/\$680</td><td>Extension for response within fourth month<sup>1</sup></td><td><input type="text"/></td></tr><tr><td>128/\$1,850</td><td>228/\$925</td><td>Extension for response within fifth month<sup>1</sup></td><td><input type="text"/></td></tr><tr><td>119/\$300</td><td>219/\$150</td><td>Notice of Appeal</td><td><input type="text"/></td></tr><tr><td>141/\$1,210</td><td>241/\$605</td><td>Petition to revive unintentionally abandoned application</td><td><input type="text"/></td></tr><tr><td>142/\$1,210</td><td>242/\$605</td><td>Utility Issue Fee (Or Reissue)</td><td><input type="text"/></td></tr><tr><td>143/\$430</td><td>243/\$215</td><td>Design Issue Fee</td><td><input type="text"/></td></tr><tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td><input type="text"/></td></tr><tr><td>123/\$50</td><td>123/\$50</td><td>Petitions related to provisional applications</td><td><input type="text"/></td></tr><tr><td>126/\$240</td><td>126/\$240</td><td>Submission of Information Disclosure Statement</td><td><input type="text"/></td></tr><tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td><input type="text"/></td></tr><tr><td>146/\$760</td><td>246/\$380</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td><input type="text"/></td></tr><tr><td>149/\$760</td><td>249/\$380</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td><input type="text"/></td></tr><tr><td colspan="2">Other fee (specify):</td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td colspan="2">Other fee (specify):</td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td colspan="2"><b>SUBTOTAL (3)</b></td><td><b>(\$0.00)</b></td><td></td></tr></tbody></table> |                      | Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description | Fee Due | 105/\$130 | 205/\$65 | Surcharge - late filing fee or oath | <input type="text"/> | 127/\$50 | 227/\$25 | Surcharge-late provisional filing fee or cover sheet | <input type="text"/> | 147/\$2,520 | 147/\$2,520 | For filing a request for reexamination | <input type="text"/> | 115/\$110 | 215/\$55 | Extension for response within first month <sup>1</sup> | <input type="text"/> | 116/\$380 | 216/\$190 | Extension for response within second month <sup>1</sup> | <input type="text"/> | 117/\$870 | 217/\$435 | Extension for response within third month <sup>1</sup> | <input type="text"/> | 118/\$1,360 | 218/\$680 | Extension for response within fourth month <sup>1</sup> | <input type="text"/> | 128/\$1,850 | 228/\$925 | Extension for response within fifth month <sup>1</sup> | <input type="text"/> | 119/\$300 | 219/\$150 | Notice of Appeal | <input type="text"/> | 141/\$1,210 | 241/\$605 | Petition to revive unintentionally abandoned application | <input type="text"/> | 142/\$1,210 | 242/\$605 | Utility Issue Fee (Or Reissue) | <input type="text"/> | 143/\$430 | 243/\$215 | Design Issue Fee | <input type="text"/> | 122/\$130 | 122/\$130 | Petitions to the Commissioner | <input type="text"/> | 123/\$50 | 123/\$50 | Petitions related to provisional applications | <input type="text"/> | 126/\$240 | 126/\$240 | Submission of Information Disclosure Statement | <input type="text"/> | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | <input type="text"/> | 146/\$760 | 246/\$380 | Filing a submission after final rejection (37 CFR 1.129(a)) | <input type="text"/> | 149/\$760 | 249/\$380 | For each additional invention to be examined (37 CFR 1.129(b)) | <input type="text"/> | Other fee (specify): |  | <input type="text"/> | <input type="text"/> | Other fee (specify): |  | <input type="text"/> | <input type="text"/> | <b>SUBTOTAL (3)</b> |  | <b>(\$0.00)</b> |  |
| Large Entity Fee Code/Fee   | Small Entity Fee Code/Fee | Fee Description   | Fee Due              |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 105/\$130   | 205/\$65                  | Surcharge - late filing fee or oath   | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 127/\$50  | 227/\$25                  | Surcharge-late provisional filing fee or cover sheet  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 147/\$2,520   | 147/\$2,520               | For filing a request for reexamination  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 115/\$110   | 215/\$55                  | Extension for response within first month <sup>1</sup>  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 116/\$380   | 216/\$190                 | Extension for response within second month <sup>1</sup>   | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 117/\$870   | 217/\$435                 | Extension for response within third month <sup>1</sup>  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 118/\$1,360   | 218/\$680                 | Extension for response within fourth month <sup>1</sup>   | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 128/\$1,850   | 228/\$925                 | Extension for response within fifth month <sup>1</sup>  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 119/\$300   | 219/\$150                 | Notice of Appeal  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 141/\$1,210   | 241/\$605                 | Petition to revive unintentionally abandoned application  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 142/\$1,210   | 242/\$605                 | Utility Issue Fee (Or Reissue)  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 143/\$430   | 243/\$215                 | Design Issue Fee  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 122/\$130   | 122/\$130                 | Petitions to the Commissioner   | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 123/\$50  | 123/\$50                  | Petitions related to provisional applications   | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 126/\$240   | 126/\$240                 | Submission of Information Disclosure Statement  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 581/\$40  | 581/\$40                  | Recording each patent assignment per property (times number of properties)  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 146/\$760   | 246/\$380                 | Filing a submission after final rejection (37 CFR 1.129(a))   | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| 149/\$760   | 249/\$380                 | For each additional invention to be examined (37 CFR 1.129(b))  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| Other fee (specify):  |                           | <input type="text"/>  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| Other fee (specify):  |                           | <input type="text"/>  | <input type="text"/> |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |
| <b>SUBTOTAL (3)</b>   |                           | <b>(\$0.00)</b>   |                      |                           |                           |                 |         |           |          |                                     |                      |          |          |  |                      |             |             |  |                      |           |          |  |                      |           |           |   |                      |           |           |  |                      |             |           |   |                      |             |           |  |                      |           |           |                  |                      |             |           |  |                      |             |           |                                |                      |           |           |                  |                      |           |           |                               |                      |          |          |   |                      |           |           |  |                      |          |          |  |                      |           |           |   |                      |           |           |  |                      |                      |  |                      |                      |                      |  |                      |                      |                     |  |                 |  |

| FEE CALCULATION (fees effective 10/01/97) |                           |                    |                      |
|---|---------------------------|--------------------|----------------------|
| Large Entity Fee Code/Fee                 | Small Entity Fee Code/Fee | Fee Description    | Fee Due              |
| 101/\$760                                 | 201/\$380                 | Utility Filing     | <input type="text"/> |
| 106/\$310                                 | 206/\$155                 | Design Filing      | <input type="text"/> |
| 108/\$760                                 | 208/\$380                 | Reissue Filing     | <input type="text"/> |
| 114/\$150                                 | 214/\$75                  | Provisional Filing | <input type="text"/> |
| <b>SUBTOTAL (1)</b>                       |                           | <b>(\$0.00)</b>    |                      |

| 2. CLAIMS                 |                           |   |
|---------------------------|---------------------------|---|
| Large Entity Fee Code/Fee | Small Entity Fee Code/Fee | Fee Description   |
| 103/\$18                  | 203/\$9                   | Claims in excess of 20                                  |
| 102/\$78                  | 202/\$39                  | Independent claims in excess of 3                       |
| 104/\$260                 | 204/\$130                 | Multiple dependent claim                                |
| 109/\$78                  | 209/\$39                  | Reissue independent claims over original patent         |
| 110/\$18                  | 210/\$9                   | Reissue claims in excess of 20 and over original patent |

| (Col. 1)   |                        | (Col. 2) |                                 | (Col. 3) |     |   |         |
|--|------------------------|----------|---------------------------------|----------|-----|---|---------|
| For  | No. of Existing Claims |          | Highest No. Previously Paid For | Extra**  | Fee |   | Fee Due |
| TOTAL  | 22                     | minus*   | 20 or 22                        | = 0      | x   | = | 0       |
| INDEP  | 2                      | minus*   | 3 or 2                          | = 0      | x   | = | 0       |
| [ ] First presentation of multiple dependent claim |                        |          |                                 |          |     |   |         |

<sup>1</sup> Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby      \* Subtract the greater number of Col. 2      **SUBTOTAL (2)** **(\$0.00)**  
\*\* If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

|                       |                     |                                 |               |
|-----------------------|---------------------|---------------------------------|---------------|
| <b>SUBMITTED BY</b>   |                     | <b>Complete (if applicable)</b> |               |
| Typed or Printed Name | Arnold M. de Guzman | Reg. Number                     | 39,955        |
| Signature             |                     | Date                            | March 5, 1999 |